# OPERATIONS.

1. P.H. DR. JANSEN. 10/4/29.
CASE - DRAINAGE OF ISCHIAL RECTAL ABSCESS. ♀.
2 INCISIONS ON EITHER SIDE OF RECTUM. SOME BLEEDING. GAUZE PUT IN FOR DRAINAGE. STITCHES. ANAESTHETIC - GENERAL. - $N_2O$ PARTLY. WHEN REGAINING CONSCIOUSNESS, SUBJECT VOMITED SLIGHT HEMORRHAGE. DRESSING.

2. P.H. DR. JANSEN. 10/5/29.
CASE - HEMORRHOIDECTOMY.
ANESTH. - LOCAL. 2 INJECTIONS NOVOCAINE. CASE 6 YRS STANDING. BURNING SENSATION. BLEEDING. ANOSCOPE USED. PARTS CAUTERIZED. (SMELLED !!) DRESSING.

3. P.H. DR. AUCHINLOSS. 10/7/29.
CASE - MASTECTOMY. AND TRANSFUSION.
ANESTHETIC - ETHER. INCISION - AXILLA - UNDER CLAVICLE, DOWN STERNUM. TOOK OFF P. MAJOR. CUT THRU FASCIA. BLOOD TRANSFUSION IN MIDDLE. INDIRECT METHOD - 50 cc SYRINGES

ABOUT 20 TIMES. CANNULAE
USED. MANY HEMORRHAGES.
CLAMPED & TIED. SUTURE
LIGATURE 3 DRAINAGE TUBES
PUT IN. 2 SMALL, 1
LARGE (? LOST 1 SMALL)
SAFETY PINS IN END.
FENESTRED. UNILATERAL DRESSING.

OCT. 9. 1929

DR. JANSSEN

AUCHINLOSS -

CHOLEDECTOMY ♂
COLEOTOMY ♀

INCISION BELOW DIAPHRAGM

NO HEMORRHAGES -

ANESTHETIC -

ETHER +

DR. MOORE. (TALKED SOME)

REMOVAL OF CYST OR SINUS
IN BREAST. CIRCULAR INCISION
SMALL LUMP REMOVED. 18 YRS.
STANDING.

Oct. 10, 1929

DR. BULL

FROZEN SECT. RADICAL MASTER. G + O + E

LYMPH GLANDS REMOVED (DR. V. FRANTZ?)

SECTIONS MADE - CANCER DIAGNOSIS - MASTERECTOMY

DR. MOORE G + O.

CAUTERIZATION OF LUNG

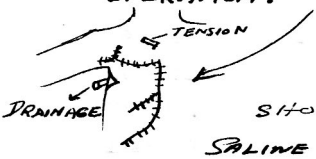
ABSCESS TISSUE LIKE CARTILAGE.

OLD SCAR TISSUE. SUBJECT TO SPASMS OF COUGHING.

Oct. 11. 1929

DR. BEVERLY SMITH. (RED HAIR) 9.30 - 1:00 G+O+E

CANCER OF BREAST. RADICAL OPERATION. INCISION - EXTRA FLAP OF SKIN CUT AND DRAWN UP. PATIENT WENT INTO SHOCK. GIVEN 4000 CC. SALINE INTRAVENOUSLY. VERY PALE. PULSE NOT PRESENT. B.P. AT BEGINNING (9.30) 130. B.P. AT END 136. PULSE QUITE STRONG. ONE OBEYING FOR DRAINAGE - ONE TO RELIEVE TENSION. ALL SKIN WILL SLOUGH OFF.




CONDITION OF METASTASES OPERATION PROBABLY DID LITTLE GOOD.

RESORTED TO BLOOD TRANSFUSION IN END. - DIRECT

Oct. 12. 1929.
Dr. Bull. Removal Lipoma on Neck. Colored ♂.
Injected anesthetic in circular region around lipoma.

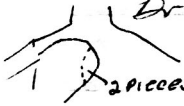
Incision transverse
Large fatty tumor.
Quite some Hemorrhage.

Oct. 15. 1929
Dr. St. John- E.
Thyroidectomy. ♀ - (18?)
Incision at base of Neck- Sides Retracted- Left Lobe Removed- Tubercles or Calcified Regions- Visible. At first, thought Tb. (Superior Thyroid comes off Carotid). Removal of Pyramidal Lobe. Carcinoma Evident. Left only small part of Posterior Lobe. Skin joined by Clips- Less scar than stitches- but hurts more. Tension.
Carcinoma and Hyper-Thyroid unusual. Whole gland diseased. Also lymph nodes near by. Prognosis Very Bad. 60% Hospital

MORTALITY. 5 CASES - 1 DIED OF POSTOPERATIVE PNEUMONIA. 2 DIED OF OPERATION, 2 RECOVERED METASTASES INEVITABLE.

EXCELLENT ANESTHETIC. PULSE CURVE ALMOST ST. LIKE. QUIET BREATHING.

DR HANFORD G+O+E.




SKIN GRAFT FROM LOWER THORACIC REGION.

(RADICAL MASTECTOMY)
DR. WHIPPLE.
FOUND TO BE A CYST AND NOT CARCINOMA. DRAINAGE IN CASE BACTERIAL INFECTION PRESENT.

Oct. 16, 1929
HYSTERECTOMY - UTERUS CYSTIC, ONE OVARY CYSTIC, - OTHER NORMAL. DID NOT REMOVE. STRONG ADHESIONS BETWEEN UTERUS AND RECTUM. RECTUM A SOLID MASS - WOULD PROBABLY BE REMOVED LATER

PATIENT GIVEN LOCAL - BUT TOO MUCH PAIN. PUT UNDER GENERAL G+O+E ?

Oct. 17 1929

<u>Expl. Coleotomy</u>- Removal of Sigmoid Colon. Colon pulled out and burnt off. Stump held outside body by alligator forceps & packed in dressing.

Indirect transfusion.

<u>Hemorrhoidectomy</u>. Large piece of rectum cut out.

Indirect transfusion: 500 cc.

etc. Dr. St. John G.&O.

Appendectomy- 16 yrs old ♀

15 cm long

Symptoms- pain 3 weeks- mild.

Cut from mesoappend. Burnt off end from caecum- tried inverting end into caecum but not successful. Reinforced around cut.

Exp. Colectomy- Spinal anesthesia- Tied colon (desc) outside body. Morphine sulfate injected in middle. Peritoneum & skin sewed up [illegible] [illegible] [illegible], iodoform [illegible] dressing